

THE EMPLOYERS MUTUAL INSURANCE CO.

COMPENSATION INSURANCE INFORMATION

THE Frederick Coal COMPANY

Name Clyde Haddon Beaumont Mine Record No. _____
 Ht. 5'4 1/2 Complexion red Color eyes blue Hair dark Age 31 Wt. 147
 Date employed 7-11 1926 In what capacity employed? digging Check No. _____
 State fully experience in coal mines 12 years

Have you a Shot Firer's Certificate? _____ Shot Examiner's? _____ Fire Boss's? _____ Mine Foreman's? _____
 For whom have you worked during the last year? For yourself ranching from _____
 to _____; For _____ from _____
 to _____; For _____ from _____ to _____
 At what work were you employed? ranching
 What languages can you speak? _____ Write Eng Read Eng
 Where were you born? Amey Iowa Are you a citizen? Yes
 Are you single, married, or a widower? single If married, give full name of wife _____
 Her age _____ Is she living with you? _____ If not, give her present address _____
 To what extent is she dependent on you for support? _____ Give names and ages
 of each of your children, and indicate those married: Those living with you _____
 _____ Not living with you (give addresses) _____

Which children, if any, are physically or mentally defective? _____
 Name children who are self supporting _____
 Is your father living? Yes If so, give his age 65 Name and address A J Haddon Mt Home Colo
 Who supports him? self
 Do you contribute to his support? Yes Is your mother living? Yes
 If so, give her age 60 Name and address Mrs A J Haddon Mt Home Colo
 Who supports her? Husband & Son Do you contribute to her support? Yes
 How much do you contribute to support of father or mother, or both? 300 per year
 Date last contribution was made _____ Amount _____
 Give names and addresses of your brothers Harold Haddon Mt Home Colo
 Give names and addresses of your sisters Mary Haddon, Beaumont Texas

Give names and addresses of EVERY ONE (other than wife, children, father or mother) dependent on you for support
none
 How much do you contribute to their support each year _____
 Date of last contribution _____ Amount _____

Have you a copy of the State Coal Mining Law? Yes Have you had notice that the above named Employer is subject
 to the provisions of the Workmen's Compensation Act? Yes, and do you elect and agree to become subject thereto
 now? Yes Do you understand the plan in force at the mine for furnishing medical, surgical and hospital service? Yes
 Give name and address of person to whom you desire notice sent in event of your death Mrs A J Haddon Mt Home Colo

Dated at Beaumont, Colo., Aug 21, 1926
 Interpreter _____
 Witness Henry F. Jones Superintendent or Mine Clerk. Clyde R. Haddon Signature of Employee or Applicant (Full Name)